

CAUSE OF DEATH in plain terms, so that it may be properly classified. Exact statement of OCCUPATION is very important. AGE should be stated EXACTLY. PHYSICIANS should state amount of cemetery supplied.

MISSOURI STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
CERTIFICATE OF DEATH

Do not use this space.

NOV 22 1937

37053

1. PLACE OF DEATH

County Bates

Registration District No. 53

Township

Primary Registration District No. 3005

City

Rich Hill

(No. 1)

File No.

Registered No. 38

St.

Ward

2. FULL NAME

August H. Elgert

(a) Residence, No.

St.

Ward.

(Usual place of abode)

(If nonresident, give city or town and State)

Length of residence in city or town where death occurred 55 yrs.

mos.

ds.

How long in U.S., if of foreign birth? 65 yrs.

mos.

ds.

PERSONAL AND STATISTICAL PARTICULARS

3. SEX

M

4. COLOR OR RACE

W

5. SINGLE, MARRIED, WIDOWED, OR DIVORCED (write the word)

Married

5A. IF MARRIED, WIDOWED, OR DIVORCED

HUSBAND OF
(OR) WIFE OF

Elizabeth Elgert

6. DATE OF BIRTH (MONTH, DAY, AND YEAR)

Dec. 2, 1855

7. AGE

YEARS

MONTHS

DAYS

If LESS than 1
day, hrs.
or min.

81

10

19

8. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc.

Zinc Works

9. Industry or business in which work was done, as silk mill, saw mill, bank, etc.

10. Date deceased last worked at this occupation (month and year)

11. Total time (years) spent in this occupation

25

12. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY)

Germany

13. NAME

Daniel Elgert

14. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY)

Germany

15. MAIDEN NAME

Henryetta Margmandt

16. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY)

Germany

17. INFORMANT (ADDRESS)

Mrs. A. H. Elgert
Rich Hill, Mo.

18. BURIAL, CREMATION, OR REMOVAL

PLACE Lutheran

DATE Oct. 22, 1937

19. UNDERTAKER (ADDRESS)

Pond & Reedy
Rich Hill, Mo.

20. FILED

Oct 22 1937
James J. Allen
Registrar

MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (MONTH, DAY, AND YEAR)

Oct 21, 1937

22. I HEREBY CERTIFY that I attended deceased from October 10, 1937 to Oct 21, 1937

I last saw him alive on Oct 21, 1937 Death is said to have occurred on the date stated above, at 1:15 P.M.

The principal cause of death and related causes of importance were as follows:

Chronic Myocarditis

Date of onset

Other contributory causes of importance:

Arteriosclerosis
Chronic Hypertrophy
Chronic Aneurysm

Name of operation

Date of

What test confirmed diagnosis?

Was there an autopsy? No

23. If death was due to external causes (violence), fill in also the following:

Accident, suicide, or homicide? Date of injury

Where did injury occur?

(Specify city or town, county, and State)

Specify whether injury occurred in industry, in home, or in public place.

Manner of injury

Nature of injury

24. Was disease or injury in any way related to occupation of deceased?

If so, specify

(Signed)

M. D.

(Address)

Rich Hill, Mo.

